## Department of the Treasury

## U.S. Nonresident Alien Income Tax Return For the year January 1-December 31, 1980, or other tax year beginning

| q | (9) | 8 | O |
|---|-----|---|---|
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| Inte                             | rnal I                       | Revenue  | Service           |  | , 1980, and er                          | nding'       |                  |   | , 19   | <u> </u>        |                  |             |
|----------------------------------|------------------------------|----------|-------------------|--|---|--------------|------------------|---|--|-----------------|------------------|-------------|
|                                  | You                          | ur first | name and initia   | al .   | Last name                               |              |                  |   |  |                 |                  |             |
| r type                           | Pre                          | esent h  | nome address (N   | lumber and street, including                           | g apartment number, o                   | r rural rou  | ıte)             |   | Identify   | ying or s       | ocial secu       | rity no.    |
| print or                         | Cit                          | ty, tow  | n or post office, | State and ZIP code                                     |   | Check w      | hether<br>vidual | Fiduciary   | Occupat  | ion in the      | u.s.             |             |
| 9                                | Of                           | what c   | ountry were you   | a citizen or national during                           | the tax year?                           |              |                  |   |  |                 |                  |             |
| Please                           |                              |          | <u>`</u>          | ou want any refund check n                             |   | Give add     | dress in t       | he country w                                      | here you a                                       | are a perm      | anent resid      | lent        |
|                                  | _                            |          | Filing Status     | and Exemptions for Ind                                 | ividuals                                | Re           | gular            | Age 65  | or over  | ВІ              | ind              | Enter       |
|                                  | Fil                          | ling st  | atus (Check o     |  |   | Yourself     | Spouse           | Yourself  | Spouse   | Yourself        | Spouse           | total       |
|                                  |                              |          |                   | of Canada or Mexico, or                                | a national of the                       |              |                  |   |  |                 |                  |             |
|                                  |                              |          |                   |  |   |              |                  | <u>//                                   </u>      |  |                 |                  |             |
|                                  | 2                            |          | ther single no    | onresident alien                                       |   |              |                  |   |  |                 |                  |             |
| _                                | 3                            |          |                   | nt of Canada or Mex-                                   | Personal exemption                      |              |                  |   |  |                 |                  |             |
|                                  |                              |          | co, or a nation   |  | for spouse is not                       |              | ·                | - <del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del> | <del>/////////////////////////////////////</del> | <i></i>         | <i>777777777</i> |             |
| here                             | 4                            | الــــا  | Married reside    | •  | allowable if spouse is filing a return. |              |                  |   |  |                 |                  |             |
| 2 h                              | _                            | •        | •                 | live in the U.S.)                                      |   |              | ·                |   |  |                 |                  |             |
| *                                |                              |          |                   | nonresident alien<br>ow(er) with dependent c           |   |              |                  |   |  | <u> </u>        |                  |             |
| of your Forms W-2                | 0                            |          | lied > 19         | ). See page 3 of Instr                                 |   |              |                  |   |  |                 |                  |             |
| For                              |                              |          |                   | endent children (applies to re                         |   | ico and lai  | nan and to       | nationals of                                      | the U.S.). J                                     | apanese ch      | ildren must      | live        |
| 'n                               | •                            |          | arent in U.S.     | chache dimarch (applied to re                          | orderite of cumulay moxi                | 100 ana 3a   | , a.i. a.i.a.    | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,           |  | •               | Enter            |             |
| f y                              |                              | ,,,,,,,  |                   |  |   |              |                  |   |  |                 | Number           | <u> </u>    |
|                                  | 8                            | Other    | dependents (app   | lies to residents of Canada an                         | d Mexico, and to nation                 | als of the l | J.S.). Give      | full name, re                                     | lationship,                                      | and months      | lived with       | you.        |
| Please attach Copy B             |                              |          |                   |  |   |              |                  |   |  |                 | Enter            |             |
| ಶ                                |                              |          |                   |  |   |              |                  |   |  |                 | Number           | <del></del> |
| act                              | 9                            |          |                   | cemptions claimed (add                                 |   |              |                  |   |  |                 | • • •            | <u>-</u>  - |
| att                              | SS                           |          |                   | ies, tips, etc   |   |              |                  |   |  | $\frac{10}{11}$ |                  |             |
| ase                              | Business                     |          |                   | me   |   |              |                  |   |  |                 |                  |             |
| E E                              | 8                            |          |                   | ee Instructions)                                       |   |              |                  |   |  | 12c             |                  |             |
|                                  | Trade                        |          |                   | 12b from line 12a . tate and local income ta           |   |              |                  |   |  | 13              |                  |             |
|                                  | Ë                            | 13       |                   | prizes   |   |              |                  |   |  | 14              |                  |             |
|                                  | with U.S.                    | 15       |                   | ome or (loss) (attach Sc                               |   |              |                  |   |  | 15              |                  |             |
|                                  | with                         |          |                   | or (loss) (attach Schedu                               |   |              |                  |   |  | 16              |                  |             |
|                                  | ted                          | 17       |                   | tal gain distributions no                              |   |              |                  |   |  | 17              |                  |             |
|                                  | <b>Effectively Connected</b> | 18       |                   | l gains or (losses) (atta                              |   |              |                  |   |  | 18 _            |                  |             |
|                                  | ತ                            | 19       | Scholarships      | and fellowships (attac                                 | h explanation) .                        |              |                  |   |  | 19              |                  |             |
|                                  | ive                          | 20       |                   | ties, rents, royalties, partners                       |   |              |                  |   |  | 20              |                  |             |
| 9                                | ĘĘ                           | 21       |                   | or (loss) (attach Schedu                               |   |              |                  |   |  | 21              |                  |             |
| her                              | me E                         |          |                   | nt compensation (insur                                 |   |              | •                |   |  | 22b             |                  |             |
| ę                                | 20                           |          |                   | unt, if any, from workshe                              |   |              |                  |   |  | 23              |                  | _           |
| ŏ                                | -                            | 23<br>24 | Total effective   | e (state nature and source)<br>ely connected income. A | ce) ➤dd amounts in colu                 | mn for I     | ines 10          | through 23  | , . <b>&gt;</b>                                  | 24              |                  |             |
| ney                              | ᇻ                            | 25       |                   | nse (attach Form 3903)                                 |   |              | 25               |   |  |                 |                  |             |
| Š                                |                              | 26       |                   | siness expenses (attach                                |   |              | 26               |   |  |                 |                  |             |
| ō                                | 쓅                            | 27       |                   | an IRA (enter code from                                |   |              | 27               |   |  |                 |                  |             |
| attach Check or Money Order here | Adjustments                  | 28       | •                 | a Keogh (H.R. 10) retin                                |   |              | 28               |   | _ -  |                 |                  |             |
| ຮ                                | ust                          | 29       | =                 | alty on early withdrawa                                |   |              | 29               |   |  |                 |                  |             |
| ach                              | ď                            | 30       | Scholarships      | and fellowships exclud                                 | ed                                      |              | 30               |   |  | /////           |                  |             |
| att                              |                              | 31       |                   | ome exclusion (attach                                  |   |              | 31               |   |  | 33              |                  |             |
| ease                             |                              | 32       | Total adjustm     | nents. Add lines 25 throu                              | gn 31                                   | • • •        | <u></u>          | <u> </u>  | · · · •  | 32 -            |                  |             |
| Ple                              | 9                            | 2 A~     | liveted grose     | income Subtract line 32                                | from line 24 Ente                       | r here a     | nd on lir        | ne 34 .   | ▶  | 33              |                  |             |

| For         | n 104      | ionr (1980)  |                                | Page                                 |
|-------------|------------|--|--------------------------------|--------------------------------------|
|             | 34         | Amount from line 33 (adjusted gross income)  | 34                             |                                      |
|             | 35         |  | 35                             |                                      |
|             | "          | Enter itemized deductions (from page of fine co).  |                                |                                      |
|             | 26         | \$3,400 if qualifying widow(er) )  | 36                             | 1                                    |
|             | 36         | Enter: { \$2,300 if single } (estates and trusts enter zero)   |                                |                                      |
|             | ,,,        | •  | 27                             |                                      |
|             | 37         |  | 37                             |                                      |
| =           | 38<br>  39 |  | 38                             |                                      |
| .≘          | 39         | If an amount appears on line 38, add it to line 34   | 39                             |                                      |
| Computation |            | Find your tax on the amount on line 39 in the Tax Tables and enter the tax on line 42. You MUST use the Tax Tables   |                                |                                      |
| ᇫ           |            | to find your tax unless one of the following applies: line 39 is more than \$20,000 (\$40,000 if box 6 is checked), OR   |                                |                                      |
| Ĕ           |            | you have more exemptions than covered in the Tax Tables for your filing status, OR you use Form 4726 to figure your  | /////                          |                                      |
| ŏ           |            | tax OR this is a return of an Estate or Trust. In these cases, use lines 40 through 42 to figure your tax. (Residents of Japan see Instruction for line 39.) If you use the Tax Tables, skip lines 40 and 41.  |                                |                                      |
| ă           | 40         |  | 40                             |                                      |
| Ë           |            |  | 41                             |                                      |
|             | 41<br>42   | Tax. Check if from Tax Tables (see instructions below line 39) or if figured on the amount on  |                                |                                      |
|             | 42         |  |                                |                                      |
|             |            | line 41 by using Tax Rate Schedule W, X, Y, or Z, OR maximum tax from Form 4726.   | 42                             |                                      |
|             | 43         | 10,00  | 43                             |                                      |
|             |            | Form 4972, Form 5544, Form 5405, or Section 72(m)(5) penalty tax   |                                |                                      |
|             | 44         | Total. Add lines 42 and 43   | 44                             |                                      |
|             | 45         |  |                                |                                      |
|             | 46         | Credit for child and dependent care expenses (attach Form 2441) . 46   |                                |                                      |
| •           | 47         | Investment credit (attach Form 3468)   |                                | †                                    |
| S           |            | Foreign tax credit (attach Form 1116)  | <i>/////</i> /                 | 1                                    |
| Credits     | 48         | Totalgh tax order (attach form 1110).  | <i>     </i>                   | 1                                    |
| ě           | 49         | Work meeticle (Willy creat (attach 10111 4074)   |                                |                                      |
| O           | 50         |  |                                |                                      |
|             | 51         | Residential energy credits (see page 6 of Instructions)  |                                |                                      |
|             | _52        | Total credits. Add lines 45 through 51   | _52                            |                                      |
|             | 53         | Balance. Subtract line 52 from line 44 and enter difference (but not less than zero)   | _53                            |                                      |
|             |            | a Minimum tax. Attach Form 4625 and check here ▶ 🗌   | 54a                            |                                      |
|             | 54         | b Alternative minimum tax. Attach Form 6251 and check here ▶ 🗌   | 54b                            |                                      |
| axes        | 55         | Tax from recomputing prior-year investment credit (attach Form 4255)   | 55                             |                                      |
| ă           | 56         | Tax on income not connected with U.S. trade or business (from page 4, line 101)  | 56                             |                                      |
| -           | 57         | Social security (FICA) tax on tip income not reported to employer (attach Form 4137)   | 57                             |                                      |
| ਰੂ          | 58         | Uncollected employee FICA and RRTA tax on tips (from Form W-2)   | 58                             |                                      |
| )#          | 59         | Tax on an IRA (attach Form 5329)   | 59                             |                                      |
| •           | 60         | Advance earned income credit (EIC) payments received (from Form W-2)   |                                |                                      |
|             | 61         |  |                                |                                      |
|             |            | Total Tax. Add lines 53 through 60   | 61                             |                                      |
|             | 62         | Total Federal income tax withheld (attach Forms W–2, W–2G, and W–2P to front) .  |                                |                                      |
|             | 63         | 1980 estimated tax payments and amount applied from 1979 return  |                                | 1.                                   |
|             | 64         | Earned income credit (see page 9 of Instructions) <u>64</u>  |                                |                                      |
| ţ           | 65         | Amount paid with Form 4868   |                                |                                      |
| Payments    | 66         | Excess FICA and RRTA tax withheld (two or more employers) 66   |                                |                                      |
| χ           | 67         | Credit for Federal tax on special fuels and oils (attach Form 4136 or 4136-T) . 67   |                                |                                      |
| Pa          | 68         | Regulated Investment Company credit (attach Form 2439) 68  |                                |                                      |
|             | 69         | Credit for amount paid with Form 1040C   |                                |                                      |
|             | 70         | U.S. tax withheld at source (from page 4, line 98)   |                                |                                      |
|             | 71         | <b>Total.</b> Add lines 62 through 70  | 71                             |                                      |
|             |            | 72 If line 71 is larger than line 61, enter amount OVERPAID  | 72                             | <del></del>                          |
| Refund or   | <b>~</b>   | - · · · · · · · · · · · · · · · · · · ·  | 73                             |                                      |
| 딛           | စ္ပ        | 73 Amount of line 72 to be REFUNDED TO YOU   |                                |                                      |
| 킂           | _          | 74 Amount of line 72 to be applied to your 1981 estimated tax .   74   |                                | •                                    |
| ₹;          |            | 75 If line 61 is larger than line 71, enter BALANCE DUE. Attach check or money order for full amount   | 1                              |                                      |
|             | ן מ        | payable to "Internal Revenue Service." Write your social security number on check or money order   | 75                             |                                      |
| Ple         | ase        | Under penalties of perjury, I declare that I have examined this return, including accompanying schedules an of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer)   | u statements,<br>is based on a | , and to the bes<br>Il information o |
| Sig         |            | which preparer has any knowledge.  |                                |                                      |
| Her         |            | Variable de la constant de la consta |                                |                                      |
|             |            | Your signature Date  |                                |                                      |
| Paid        | 1          | signature self-em-   | reparer's soc                  | ial security no                      |
|             | arer'      | and date   |                                |                                      |
|             | Only       | Firm's name (or yours, if self-employed)   |                                |                                      |
|             |            | and address ZIP code   |                                |                                      |

| lter         | mized Deductions  |                                    |                | •         |  |   |
|--------------|---|------------------------------------|----------------|-----------|--|---|
| in t         | his schedule list your deductions from inc  | ome connected                      | with a         | u.S.      | trade or business.   |   |
| b            | State income taxes  |                                    |                | 80a       | Personal casualty or theft loss of more than \$100 after insurance reimbursement   |   |
| ,,<br><br>78 | Enter here and on line 84   |                                    |                | h         | lines 80a and b and see instructions. Subtract \$100   | 100 00                                    |
| ,,           |   |                                    | 1 1            | ŀ         | Casualty or theft loss. Enter here and on line 86  |   |
|              |   |                                    | 1 1            | 82        | Miscellaneous deductions (Itemize)   |   |
|              |   |                                    |                |           |  |   |
|              |   |                                    |                | 83        | Total miscellaneous deductions. Enter  |   |
|              |   |                                    |                | 84        | here and on line 87  |   |
|              |   |                                    |                | 85<br>86  | Contributions (from line 79)   |   |
|              |   |                                    | 1 1            | 87        | Miscellaneous deductions (from line 83)  |   |
| 79           | Total contributions. Enter here and on line 85  |                                    |                |           | Total deductions. Enter here and on page 2, line 35  |   |
|              | (Enter  | Please An                          | swer<br>stion: | All s     | Questions do not apply to you.)  |   |
|              | /hat country issued your passport?  |                                    |                | K H<br>th | ave you excluded from gross income in is return any amount, other than foreign burce income not effectively connected ith a U.S. trade or business?    | 1<br>[                                    |
|              | /ere you ever a U.S. citizen? ive the purpose of your visit to the U.S  |                                    |                |           | If "Yes," attach statement showing amource of each item of this income and   | nount, nature, and                        |
|              |   |                                    | 1              |           | cluded from gross income. you claimed the benefits of a U.S. inco  | me tax convention                         |
| D T;         | ype of entry visa and visa number   |                                    | - 1            |           | ith a foreign country, please give the follo   |   |
| as           | id you abandon your permanent residenc<br>s an immigrant in the U.S. this year? .<br>ates you entered and left the U.S. duri                      | .   Yes                            | No             |           | Kind and amount of exempt income you by the applicable tax treaty:  for 1980   |   |
| de<br>fr     | ents of Canada or Mexico entering and equent intervals, give name of country on   | leaving the U.S.                   | . at           |           | for earlier years  |   |
| G F          | or nonresident aliens from tax treaty co<br>er of days (including vacation and non-we   | untries. Give no                   | um-            | 10        | Were you subject to tax in that country any of the income you claim is entitled the convention benefits?   | y<br>d                                    |
| H F          | the U.S. during 1980or residents of Canada, Mexico, or Japan, nited States. Did your spouse contribute to hildren claimed on Form 1040NR, line 7? | or a national of<br>the support of | the<br>any     | in        | Did you have a permanent establishent (as defined by the tax convention) the U.S. at any time during 1980?   | . No Yes No                               |
| l D          | If "Yes," state amount \$id you file a U.S. income tax return for an ear before 1980?   |                                    |                | sr<br>sh  | you file this return to report commusouse's name, address, and social secur<br>sow the address of the Internal Revenue Se<br>s or her return was filed | rity number. Also,<br>ervice Center where |
|              | If "Yes," give the latest year and form nu  | mber                               |                |           | or ner return was med  | ·····                                     |
| •            | To which Internal Revenue Service Cente   | r was it sent?                     |                | •         |  | ······                                    |
|              | which Internal Revenue office did you aimed on Form 1040NR, lines 63, 65, and   | pay any amou                       | ints           | N D       | id you file Form 1040C or Form 2063 dur- g the tax year?   | Yes No al Revenue Service                 |

Computation of Tax on Income Not Connected with U.S. Trade or Business

(On an attachment, please show names and addresses of withholding agents and payers of income.)

|   | U.S. tax withheld        |                      |                      | Enter amount of ir | Enter amount of income under the appropriate rate of tax | opriate rate of tax |             |         |
|---|--------------------------|----------------------|----------------------|--------------------|--|---------------------|-------------|---------|
| Nature of Income  | at source                | (a) 2%               | (p) 2%               | (c) 10%            | (d) 14%  | (e) 15%             | (f) 271/2 % | (g) 30% |
| 89 Dividends paid by:   |                          |                      |                      |                    |  |                     |             |         |
| b Foreign corpora-  |                          |                      |                      |                    |  |                     |             |         |
| 90 Interest:  |                          |                      |                      |                    |  |                     |             |         |
| b Paid by foreign cor-  |                          |                      |                      |                    |  |                     |             |         |
| c Others  |                          |                      |                      |                    |  |                     |             |         |
| 91 Copyrights   |                          |                      |                      |                    |  |                     |             |         |
| 92 Industrial royalties .   |                          |                      |                      |                    |  |                     |             |         |
| 94 Real property income .   |                          |                      |                      |                    |  |                     |             |         |
| Pensi<br>Capit<br>gain  |                          |                      |                      |                    |  |                     |             |         |
| 97 Other (specify)  |                          |                      |                      |                    |  |                     |             |         |
|   |                          |                      |                      |                    |  |                     |             |         |
| 98 Total tax withheld at source. Enter here and on Form 1040NR, line 70   |                          |                      |                      |                    |  |                     |             |         |
| 99 Total income (add lines 89 through 97 for each column)   | s 89 through 97 for      |                      |                      |                    |  |                     |             |         |
| 100 Tax on income (multiply income on line 99 by rate of tax)   | income on line 99 by     |                      |                      |                    |  |                     |             |         |
| 101 Total tax on income not connected with U.S. trade or business (total of amounts on line 100). Enter here and on Form 1040NR, line 56. | connected with U.S. trad | de or business (tota | al of amounts on lin | e 100). Enter here | and on Form 1040N  | IR, line 56 ▶       |             |         |
| Enter only the gains and  |                          |                      | Gains and Los        | sses from Sales    | Gains and Losses from Sales or Exchanges of Property     | Property            |             |         |

losses from property sales or exchanges that are from sources within the U.S. and not connected with a U.S. business. (Include all amounts listed in the instructions for page 4, except amounts described in paragraph 1.)

102 Net gain. Enter on line 96 above Report property sales or exchanges that are connected with a U.S. business on Schedule D (Form 1040), Form 4797, or both.

|  | Gains and Lo                        | Gains and Losses from Sales or Exchanges of Property | or Exchanges of                           | Property  |  |   |
|--|-------------------------------------|--|---|---|--|---|
| Kind of property and description (if necessary, attach statement of descriptive details not shown below) | Date of acquisition (mo., day, yr.) | Date of<br>sale<br>(mo., day, yr.)                   | Gross sales price<br>less expense of sale | Depreciation allowed<br>(or allowable) since<br>acquisition | Cost or other basis;<br>cost of later improve-<br>ments (if not bought,<br>attach explanation) | Add columns (d) and (e); then subtract column (f) |
| (a)  | <b>(P)</b>                          | (9)  | 9   | (e)   | €  | (3)   |
|  |                                     |  | \$  |   | \$   | ₩.  |
|  |                                     |  |   |   |  |   |
|  |                                     |  |   |   |  |   |
|  |                                     | 1  |   |   |  | 1           |